## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	NO. DATE	
FEE DETERMINATION	1.	(de(021	10/24	
O.I.P.E. CLASSIFIER	1		,	
FORMALITY REVIEW		65955	11/28	
RESPONSE FORMALITY REVIEW				

## INDEX OF CLAIMS

~	Rejected	N	Non-elected
=	Allowed	- 1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

Claim	Date	Claim	Date	Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions staple additional sheet here